Virginia State Board of Elections



Statement of Organization CANDIDATE

CHAMAGNALEXANDRIA MAR 1 5 2012

VOTER REGISTRATION
ELECTORAL BOARD

☐ New Candidate

ELECTORAL BOARD

Amended Statement

*Please read instructions before completing this form.

Campaign Committee's Mailing Address					
Campaign Committee's Mailing Address	Silberberg for C Name of Candidate Campaign Commit City Council Office Sought District (1544 Mount Eagle Plan Street Address/PO Box Alexandria City allison@allisonsilberber Email Address	ifone) ace Virginia	Political Party Suite # 22302	IVIVARIA WI	
Candidate's Information					
Candidate Information	Ms. Silberberg Mr.Ms. Last Name 1544 Mount Eagle Residence Address Alexandria City allison@allisonsilber Email Address	Allis First Nat Place Virginia State berg.com	Suite # 22302 Zip C 703-3 Daytime Phone #	Alexandria County or City 79-5565	
Treasurer Information					
Treasurer's Name and Address	Mr./Ms. Last Name 5300 Holmes Run Residence Address Alexandria City a pidikiti (a gmail. c Email Address)	Parkway	5 Suite #	ounty or City	
Campaign Depository					
U.S. Senate Federal Credit Union (on Eisenhomez in Alexandra)					
Primary Financial	Institution and Address	Secondary Financial Institution and Address (if applicable)			



Statement of Organization CANDIDATE

Signatures				
Candidate's Signature	I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the Code of Virginia). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the Code of Virginia. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony. March 15, 2012 Date			
Treasurer's Signature	I accept the appointment of Treasurer of this campaign committee. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the Code of Virginia). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the Code of Virginia for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.			
	Treasurer's Signature Date			
Filing Method				
	 ☑ Electronic Filer - I, as treasurer of this campaign committee, intend to file all required campaign financial disclosure reports to the State Board of Elections by electronic means. I agree that if at anytime the campaign committee does not intend to file electronically, that I will submit an amended Statement of Organization stating such. ☑ I intend to electronically file using Virginia's VAFiling Program. ☐ I intend to use an SBE Approved Vendor 			
Electronic Filing Agreement	(Please Enter Name of Vendor) Opti Pidibiti Smith Signature Date Date Paper Filer - I, as treasurer of this campaign committee, intend to file all required campaign financial disclosure reports on paper. I agree that if at any time the campaign committee does not			
	intend to file on paper, that I must submit an amended Statement of Organization stating such. Signature Date			